



Honolulu Ethics Commission
925 Dillingham Boulevard, Ste. 190
Honolulu, HI 96817

TEL: (808) 768-9242
Email: ethics@honolulu.gov
www.honolulu.gov/ethics/lobbyist

THIS SPACE FOR OFFICE USE ONLY

2021 REGISTRATION

Lobbyist Registration

PART I. LOBBYIST – This section applies to you as a lobbyist		
NAME (Last)	(First)	(M.I.)
LOBBYIST FIRM/EMPLOYER (If applicable)		TELEPHONE
MAILING ADDRESS (No. and Street or P.O. Box)		EMAIL
(City)	(State)	(Zip Code)

PART II. A. ORGANIZATION – This section refers to the organization for which you lobby		
NAME OF ORGANIZATION (Do not abbreviate)	TELEPHONE	
MAILING ADDRESS (No. and Street or P.O. Box)	EMAIL	
(City)	(State)	(Zip Code)
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of a membership organization) <input type="checkbox"/> Not Applicable		
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS <input type="checkbox"/> Not Applicable		

PART II. B. NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II. A. and I will submit an annual report through the termination date.	TERMINATION DATE

PART III. DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Budget	<input type="checkbox"/> Business, Economic Development	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Community Services	<input type="checkbox"/> Housing	
<input type="checkbox"/> Intergovernmental Affairs	<input type="checkbox"/> Parks	
<input type="checkbox"/> Public Infrastructure	<input type="checkbox"/> Public Safety and Welfare	
<input type="checkbox"/> Sustainability	<input type="checkbox"/> Technology	
<input type="checkbox"/> Tourism	<input type="checkbox"/> Transportation	
<input type="checkbox"/> Zoning, Planning	<input type="checkbox"/> Other (indicate): _____	

PART IV. LOBBYIST CERTIFICATION

<i>I hereby certify that the foregoing statements are true and correct.</i>	Subscribed and sworn to before me
_____	This _____ day of _____, _____.
Lobbyist Signature	By: _____
_____	<i>Notary or any official authorized to administer oaths</i>
Date	My commission expires: _____

PART V. AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
MAILING ADDRESS (No. and Street or P.O. Box)		EMAIL	
(City)	(State)	(Zip Code)	
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>			
Signature of Authorizing Officer or Person Represented		Date	